24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

| Schedule E) | | | | PAGE 1 OF 2 FOR SE OF FORM 24/48 |
|---|---------------------------------|-----------------------|-----------------------------|---|
| NAME OF COMMITTEE (In Full) | | | FE | EC IDENTIFICATION NUMBER ▼ |
| Maryland USA | | | | C00581777 |
| | | | | 5 0000 |
| Check if 24-hour report 48- | nour report New repo | ort Amends repo | rt filed on | M / D D / Y Y Y Y Y |
| Full Name of Payee 406 Enterprises LLC | | | Date of F | Public Distribution/Dissemination |
| | | | 04 | |
| Mailing Address PO Box 75727 | | | Amount | |
| City | State | Zip Code | | 103247.89 |
| Washington | Vashington DC 20013 | | | tion ID : SE.4262 Disbursement or Obligation |
| Purpose of Expenditure Digital advertising (placement) | | Category/ Type 004 | M 04 | M / D D / Y Y Y Y |
| Name of Federal Candidate | | Support | Office Sought: | X House District: 06 |
| Amie Hoeber | | Oppose | President | Senate State: MD |
| Calendar Year-To-Date Per Election for Office Sought | | 1386918.89 | Disbursement Fe 2016 Othe | or: |
| Full Name of Payee | | | Date of F | Public Distribution/Dissemination |
| Starboard Communication | IS | | 04 | |
| Mailing Address 1043 Barr Road | | | Amount | |
| City | State | Zip Code | | 25833.92 |
| Lexington | SC | 29072 | | on ID : SE.4263 Disbursement or Obligation |
| Purpose of Expenditure Direct mail | | Category/ Type 004 | M 04 | |
| Name of Federal Candidate | | Support | Office Sought: | House District: 06 |
| Amie Hoeber | | Oppose | President | Senate State: MD |
| Calendar Year-To-Date Per Election for Office Sought | | 1412752.81 | Disbursement F 2016 Othe | or: X Primary General or (specify) ▶ |
| (a) SUBTOTAL of Itemized Indepen | dent Expenditures | | | 129081.81 |
| | | | | 7 7 7 |
| (b) SUBTOTAL of Unitemized Indep | endent Expenditures | | · • | 7 |
| (c) TOTAL Independent Expenditure | s | | • | 7.1.7.1.4.1 |
| Under penalty of perjury I certify that with, or at the request or suggestion party committee) any political party of | of, any candidate or authorized | | | |
| Joel Riter | | | M = M / D | D / Y Y Y Y Y |
| Signature | [Electron | ically Filed] Date | 04 | 15 2016 |
| | | | | |

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

| Schedule E) | -5 | PAGE 2 OF 2 FOR SE OF FORM 24/48 | | | |
|---|---------------------------------------|---|--|--|--|
| NAME OF COMMITTEE (In Full) | | FEC IDENTIFICATION NUMBER ▼ | | | |
| Maryland USA | | C C00581777 | | | |
| Check if X 24-hour report 48-hour report New report | Amends report filed on | A = M / D = D / Y = Y = Y = Y | | | |
| Full Name of Payee | Date | of Public Distribution/Dissemination | | | |
| Starboard Communications | | 04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| Mailing Address 1043 Barr Road | Amou | unt | | | |
| City State Zip Co | de | 18566.08 | | | |
| Lexington SC 29072 | | saction ID : SE.4265 of Disbursement or Obligation | | | |
| Purpose of Expenditure Direct mail Categ | gory/ Type 004 | 04 15 2016 | | | |
| Name of Federal Candidate | Support Office Sough | nt: X House District: 06 | | | |
| Amie Hoeber | Oppose Presid | | | | |
| Calendar Year-To-Date Per Election for Office Sought 143131 | Disbursemer 2016 | nt For: | | | |
| Full Name of Payee | | of Public Distribution/Dissemination | | | |
| Mailing Address | | | | | |
| | Amou | unt | | | |
| City State Zip Co | ode | | | | |
| | Date | of Disbursement or Obligation | | | |
| Purpose of Expenditure Categ | gory/ Type | M M / D D / Y Y Y Y | | | |
| Name of Federal Candidate | Support Office Sough | ht: House District: | | | |
| | Oppose Presid | dent Senate State: | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursemen | nt For: Primary General Other (specify) ▶ | | | |
| | | | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | ····· | 18566.08 | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| (c) TOTAL Independent Expenditures | · · · · · · · · · · · · · · · · · · · | 147647.89 | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Joel Riter[Electronically Fi | iled] Date 04 | 15 2016 | | | |
| Signature | | | | | |